AP20 R3c'4 PCT/PTO 14 DEC 2005

Application Data Sheet

Application Information

Application Type::

Subject Matter::

National Stage

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?::

None

No

Number of copies of CRF::

Computer Readable Form (CRF)::

0

Title::

TRACEABLE METHOD AND SYSTEM FOR

ENCRYPTING AND/OR DECRYPTING

DATA, AND RECORDING MEDIA

THEREFOR

Attorney Docket Number::

0512-1307

Request for Early

No

Publication?::

Request for Non-Publication?::

No

Suggested Drawing Figure::

Total Drawing Sheets::

2

Small Entity?::

No

Latin Name::

Variety Denomination Name::

Petition Included?::

No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent

No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: DAVID

Middle Name::

Family Name:: ARDITTI MODIANO

Name Suffix::

City of Residence:: CLAMART

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 46TER, RUE PAUL VAILLANT-COUTURIER

Address::

City of Mailing Address:: CLAMART

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 92140

Applicant Authority Type:: Inventor Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: OLIVER

Middle Name::

Family Name:: BILLET

Name Suffix::

City of Residence:: TOURRETTES/LOUP

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 1211 ROUTE DES VALLETTES SUD

Address::

City of Mailing Address:: TOURRETTES/LOUP

Initial 12/14/05

State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing Address:: 06140 Applicant Authority Type:: Inventor Primary Citizenship Country:: FRANCE Full Capacity Status:: HENRI Given Name:: Middle Name:: GILBERT Family Name:: Name Suffix:: BURES SUR YVETTE City of Residence:: State or Province of Residence:: FRANCE Country of Residence:: 2, ALLÉE DES PEUPLIERS Street of Mailing Address:: BURES SUR YVETTE City of Mailing Address:: State or Province of Mailing Address:: **FRANCE** Country of Mailing Address:: Postal or Zip Code of Mailing Address:: 91440 Correspondence Information 00466 Correspondence Customer Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/FR2004/001362	6/2/04

Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
FRANCE	0307287	6/17/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::